

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

41-0547

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	19	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	minus 20 =	
INDEPENDENT CLAIMS	minus 3 =	1
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	25	20	5
Independent	4	4	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE	RATE	FEE
BASIC FEE	355.00	BASIC FEE	710.00
X\$ 9=		X\$18=	
X40=		X80=	80
+135=		+270=	
TOTAL		TOTAL	

SMALL ENTITY OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		X\$18=	90.00
X40=		X80=	
+135=		+270=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	9	25	
Independent	4	4	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		X\$18=	
X40=		X80=	
+135=		+270=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total			
Independent			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		X\$18=	
X40=		X80=	
+135=		+270=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

* If the entry in column 1 is less than 0, enter "0" in column 2.
 ** If the "Highest Number Previously Paid For" is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" is less than 3, enter "3."

If the "Highest Number Previously Paid For" is less than 3, enter "3."
 (Independent) is the highest number found in the appropriate box in column 1.

FORM PTO-875
 (Rev. 8/00)

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